

**UNITED STATES PATENT & TRADEMARK OFFICE**  
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REQUEST FOR PATENT FEE REFUND			
1 Date of Request: _____		2 Serial/Patent # <u>10/519500</u>	
3 Please refund the following fee(s):	4 PAPER NUMBER	5 DATE FILED	6 AMOUNT
<input checked="" type="checkbox"/> Filing	1	12/27/04	\$ 100
<input type="checkbox"/> Amendment			\$
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7 TOTAL AMOUNT OF REFUND			\$ 100
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<div style="display: flex; justify-content: space-between;"> <div style="width: 55%;">           10 REASON:           <div style="border: 1px solid black; height: 20px; width: 100%; margin-top: 5px;"></div> <div style="display: flex; margin-top: 5px;"> <div style="width: 30%;"><input checked="" type="checkbox"/> Overpayment</div> <div style="width: 30%;"><input type="checkbox"/> Duplicate Payment</div> <div style="width: 30%;"><input type="checkbox"/> No Fee Due (Explanation): _____</div> </div> </div> <div style="width: 40%;"> <div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">Treasury Check</div> <div style="display: flex; align-items: center;"> <input checked="" type="checkbox"/> Credit Deposit A/C #:           <div style="border: 1px solid black; padding: 2px; margin-left: 10px;">             9 <span style="border: 1px solid black; padding: 0 5px;">1</span><span style="border: 1px solid black; padding: 0 5px;">1</span><span style="border: 1px solid black; padding: 0 5px;">--</span><span style="border: 1px solid black; padding: 0 5px;">0</span><span style="border: 1px solid black; padding: 0 5px;">6</span><span style="border: 1px solid black; padding: 0 5px;">0</span><span style="border: 1px solid black; padding: 0 5px;">0</span> </div> </div> </div> </div>			
11 REFUND REQUESTED BY: _____			
TYPED/PRINTED NAME: <u>A Johnson</u>		TITLE: <u>paralegal</u>	
SIGNATURE: <u><i>A Johnson</i></u>		PHONE: <u>308-9140</u>	
OFFICE: <u>PCT</u>			
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****			
APPROVED: _____		DATE: _____	

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